Application Data Sheet

Application Information

Application number::

Filing Date::

Application Type::

Divisional

Subject Matter::

Utility

Suggested classification::

Suggested Group Art Unit::

1626

CD-ROM or CD-R?::

None

Number of CD disks::

Number of copies of CDs::

Sequence submission?::

Computer Readable Form

(CRF)?::

No

Number of copies of CRF::

Title::

PROCESS TO PREPARE OXAZOLIDINONES

Attorney Docket Number::

00393.US1DV1

Request for Early

Publication?::

No

Request for

Non-Publication?::

No

Suggested Drawing Figure::

Total Drawing Sheets::

Page 1 Initial

Application Data Sheet

Application Information

Small Entity?::

Latin name::

Variety denomination name::

Petition included?::

No

Petition Type::

No

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: USA

Status:: Full Capacity

Given Name:: William

Middle Name:: R.

Family Name:: Perrault

Name Suffix::

City of Residence:: Kalamazoo

State or Province of Residence:: Michigan

Country of Residence:: USA

Street of mailing address:: 5256 Manana Ave

City of mailing address:: Kalamazoo

State or Province of mailing address:: Michigan

Country of mailing address:: USA

Postal or Zip Code of mailing address:: 49004

Applicant Authority Type:: Inventor

Primary Citizenship Country:: USA

Status:: Full Capacity

Given Name:: Bruce

Middle Name:: Allen

Family Name:: Pearlman

Name Suffix::

City of Residence:: Kalamazoo

State or Province of Residence:: Michigan

Country of Residence:: USA

Street of mailing address:: 3411 Willow Lake Drive, #308

City of mailing address:: Kalamazoo

State or Province of mailing address:: Michigan

Country of mailing address:: USA

Postal or Zip Code of mailing address:: 49008

Page 2 Initial

Delete This Page Applicant Authority Type:: Inventor Primary Citizenship Country:: India Status:: Full Capacity Given Name:: Delara Middle Name:: B. Family Name:: Godrej Name Suffix:: City of Residence:: Kalamazoo State or Province of Residence:: Michigan Country of Residence:: USA Street of mailing address:: 716-B Garland Circle City of mailing address:: Kalamazoo State or Province of mailing address:: Michigan Country of mailing address:: **USA** Postal or Zip Code of mailing address:: 49008 Applicant Authority Type:: Primary Citizenship Country:: Status:: Given Name:: Middle Name:: Family Name:: Name Suffix:: City of Residence:: State or Province of Residence:: Country of Residence::

State or Province of mailing address::

Street of mailing address::

Country of mailing address::

City of mailing address::

Correspondence Information

Correspondence Customer Number::	25533
Name::	
Street of mailing address::	
City of mailing address::	
State or Province of mailing address::	
Country of mailing address::	
Postal or Zip Code of mailing address::	
Phone number::	
Fax Number::	
E-Mail address::	

Page 3 Initial